

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Funeral Directors Association of the United States Inc

ADDRESS (number and street) 13625 Bishops Drive
 Check if different than previously reported. (ACC)
Brookfield WI 53005

2. **FEC IDENTIFICATION NUMBER** C00204008
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 04 2008 in the State of WI

5. Covering Period 10 16 2008 through 11 24 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer William C. Wappner, CFSP

Signature of Treasurer Electronically Filed by William C. Wappner, CFSP Date 12 02 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
National Funeral Directors Association of the United States Inc

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		47609.92
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	14059.92									
(c) Total Receipts (from Line 19)	30570.00	117120.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	44629.92	164729.92								
7. Total Disbursements (from Line 31)	12000.20	132100.20								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32629.72	32629.72								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
National Funeral Directors Association of the United States Inc

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12775.00	49900.00
(i) Itemized (use Schedule A)	17795.00	67220.00
(ii) Unitemized	30570.00	117120.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	30570.00	117120.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	30570.00	117120.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30570.00	117120.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8125.00	128225.00
24. Independent Expenditure (use Schedule E)	3875.20	3875.20
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12000.20	132100.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12000.20	132100.20

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	30570.00	117120.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30570.00	117120.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)

Scott B. Anthony

Mailing Address 1031 Ridge Rd

City State Zip Code
Webster NY 14580-2907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Funeral Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.13207

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)

Robert L Bates

Mailing Address PO Box 368

City State Zip Code
De Kalb TX 75559-0368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Funeral Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.13296

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)

Fred A. Behner

Mailing Address PO Box 610

City State Zip Code
Fairfield IA 52556-0011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA Funeral Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13135

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ▶

520.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Jack D Briggs

Mailing Address PO Box 218

City State Zip Code
Denton NC 27239-0218

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Briggs Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.13056

Amount of Each Receipt this Period 200.00

B.

Full Name (Last, First, Middle Initial)
Ginger C. Caldwell

Mailing Address PO Box 630

City State Zip Code
Covington GA 30014-2420

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Caldwell & Cowan Funeral Home Inc. Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 565.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13077

Amount of Each Receipt this Period 65.00

C.

Full Name (Last, First, Middle Initial)
Deborah Daniels

Mailing Address PO Box 573

City State Zip Code
Greenville AL 36037-0573

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NA Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.13080

Amount of Each Receipt this Period 385.00

SUBTOTAL of Receipts This Page (optional) 650.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) Carlos R. Guerra	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 5800 E Beverly Blvd	Transaction ID: SA11AI.13190
	City State Zip Code Los Angeles CA 90022-2898	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Guerra & Gutierrez Mortuaries Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

B.	Full Name (Last, First, Middle Initial) Steven A. Hairfield	Date of Receipt MM / DD / YYYY 10 / 31 / 2008
	Mailing Address PO Box 3591	Transaction ID: SA11AI.13289
	City State Zip Code Morganton NC 28680	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Hairfield Vault Co Salesman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Terry Harmon	Date of Receipt MM / DD / YYYY 10 / 31 / 2008
	Mailing Address 500 S 1st Ave	Transaction ID: SA11AI.13248
	City State Zip Code Arcadia CA 91006-3831	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Arcadia Chapel of Remembrance Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial)
Doretha F Hector

Mailing Address 4000 Callaway Ave

City State Zip Code
Baltimore MD 21215

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Phillips Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
10 / 31 / 2008

Transaction ID: SA11AI.13147

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Bryant Hightower

Mailing Address PO Box 215

City State Zip Code
Carrollton GA 30112-0004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Martin & Hightower F H Inc Funeral Director
Heritage Ch

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt M M / D D / Y Y Y Y
11 / 07 / 2008

Transaction ID: SA11AI.13075

Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Bryant Hightower

Mailing Address PO Box 215

City State Zip Code
Carrollton GA 30112-0004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Martin & Hightower F H Inc Funeral Director
Heritage Ch

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt M M / D D / Y Y Y Y
11 / 07 / 2008

Transaction ID: SA11AI.13076

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) James C. Hirsch	Date of Receipt MM / DD / YYYY 11 / 20 / 2008
	Mailing Address 7151 183rd St	Transaction ID: SA11AI.13197
	City State Zip Code Tinley Park IL 60477-3932	Amount of Each Receipt this Period 335.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NA Occupation Funeral Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00

B.	Full Name (Last, First, Middle Initial) Mr. Jim Bob Humphrey	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address PO Box 819	Transaction ID: SA11AI.13158
	City State Zip Code Russellville AR 72811	Amount of Each Receipt this Period 1255.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Humphrey Funeral Service Occupation Funeral Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1255.00

C.	Full Name (Last, First, Middle Initial) Michael B. Hurtt	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 217 S Hampton Rd	Transaction ID: SA11AI.13058
	City State Zip Code DeSoto TX 75115-5764	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer West-Hurtt Funeral Home Occupation Funeral Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)	1840.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) Frank H Jones	Date of Receipt MM / DD / YYYY 10 / 31 / 2008
	Mailing Address PO BOX 555	Transaction ID: SA11AI.13103
	City State Zip Code Richton MS 39476-0555	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation HL Jones Funeral Home Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Thomas Kukuchka	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 73 W Tioga St	Transaction ID: SA11AI.13195
	City State Zip Code Tunkhannock PA 18657-1446	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Sheldon-Kukuchka Funeral Home Inc Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Thomas Kukuchka	Date of Receipt MM / DD / YYYY 10 / 29 / 2008
	Mailing Address 73 W Tioga St	Transaction ID: SA11AI.12954
	City State Zip Code Tunkhannock PA 18657-1446	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Sheldon-Kukuchka Funeral Home Inc Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial)
Mrs. Diana D. Kurz, CFSP

Mailing Address 20 Bonair Ave.

City Newington State CT Zip Code 06111

FEC ID number of contributing federal political committee. **C**

Name of Employer Newington Memorial FH Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2008

Transaction ID: SA11AI.13021

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Patrick T Lanigan

Mailing Address 700 Linden Ave

City East Pittsburgh State PA Zip Code 15112-1206

FEC ID number of contributing federal political committee. **C**

Name of Employer Patrick T Lanigan Funeral Home Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 29 / 2008

Transaction ID: SA11AI.13039

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Patrick E Lynch

Mailing Address 1368 N Crooks Rd

City Clawson State MI Zip Code 48017-1092

FEC ID number of contributing federal political committee. **C**

Name of Employer Lynch & Sons Funeral Directors Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2008

Transaction ID: SA11AI.12956

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 23
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Robert C. Moore

Mailing Address 1591 Alps Rd

City State Zip Code
Wayne NJ 07470-3641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Moore's Home for Funerals Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2008

Transaction ID: SA11AI.13026

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Meg Mountcastle, CFSP

Mailing Address 4143 Dale Blvd

City State Zip Code
Dale City VA 22193-2224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mountcastle Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2215.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2008

Transaction ID: SA11AI.13203

Amount of Each Receipt this Period
2215.00

C.

Full Name (Last, First, Middle Initial)
Meg Mountcastle

Mailing Address 4143 Dale Blvd

City State Zip Code
Dale City VA 22193-2224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mountcastle FH Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2008

Transaction ID: SA11AI.13202

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **2815.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 23
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Myron Nohava

Mailing Address PO Box 200

City State Zip Code
Baltic SD 57003-0200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Minnehaha Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.13144

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Meredith I. Norton

Mailing Address 10325 S Parkglenn Way

City State Zip Code
Parker CO 80138-3853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.13244

Amount of Each Receipt this Period
530.00

C.

Full Name (Last, First, Middle Initial)
James M Olson

Mailing Address 1132 Superior Avenue

City State Zip Code
Sheboygan WI 53081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lippert-Olson Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.13221

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **830.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 23
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Bruce A. Overton, CFSP

Mailing Address 714 1st St

City State Zip Code
Traer IA 50675-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Overton Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.13133

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Rick D. Phillips

Mailing Address PO Box 7236

City State Zip Code
East Wenatchee WA 98802-0236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.13175

Amount of Each Receipt this Period
290.00

C.

Full Name (Last, First, Middle Initial)
Robert Rosson

Mailing Address PO Box 1200

City State Zip Code
Oxford MS 38655-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Waller Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.13086

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 590.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Curtis Rostad

Mailing Address 1305 W 96th St Ste A

City State Zip Code
Indianapolis IN 46260-1193

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Indiana Funeral Directors Assn Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.12999

Amount of Each Receipt this Period
280.00

B.

Full Name (Last, First, Middle Initial)
Mr. Mark Russell

Mailing Address 230 Waterman St

City State Zip Code
Providence RI 02906-5203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Monahan-Drabble-Sherman Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.13011

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Brian L. Smith

Mailing Address 85 S Main St

City State Zip Code
Keyser WV 26726-3120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13054

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial)
Paul C St. Pierre

Mailing Address 1074 Old Eagle Way

City Greenwood State IN Zip Code 46143

FEC ID number of contributing federal political committee. **C**

Name of Employer: Wilson- St. Pierre Funeral Ser Occupation: Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 27 / 2008
Transaction ID: SA11AI.13272
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial)
Wendell Stringer

Mailing Address PO Box 884

City Hazlehurst State MS Zip Code 39083-0884

FEC ID number of contributing federal political committee. **C**

Name of Employer: Stringer Funeral Home Occupation: Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 29 / 2008
Transaction ID: SA11AI.13098
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Wendell Stringer

Mailing Address PO Box 884

City Hazlehurst State MS Zip Code 39083-0884

FEC ID number of contributing federal political committee. **C**

Name of Employer: Stringer Funeral Home Occupation: Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 04 / 2008
Transaction ID: SA11AI.13099
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Robert F Vandenberg

Mailing Address 59302 Glacier Club Drive

City State Zip Code
Washington MI 48094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Funeral Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.13180

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
William C. Wappner, CFSP

Mailing Address 98 S Diamond St

City State Zip Code
Mansfield OH 44902-9954

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wappner Funeral Directors Funeral Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13118

Amount of Each Receipt this Period

360.00

C.

Full Name (Last, First, Middle Initial)
William C. Wappner, CFSP

Mailing Address 98 S Diamond St

City State Zip Code
Mansfield OH 44902-9954

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wappner Funeral Directors Funeral Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.13119

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
William C. Wappner, CFSP

Mailing Address 98 S Diamond St

City Mansfield State OH Zip Code 44902-9954

FEC ID number of contributing federal political committee. **C**

Name of Employer Wappner Funeral Directors Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt: 10 / 29 / 2008
Transaction ID: SA11AI.13120
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
David Weber

Mailing Address 401 S Chester St

City Baltimore State MD Zip Code 21231-2730

FEC ID number of contributing federal political committee. **C**

Name of Employer David J Weber Funeral Homes Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 27 / 2008
Transaction ID: SA11AI.13046
 Amount of Each Receipt this Period: 220.00

C.

Full Name (Last, First, Middle Initial)
David Weber

Mailing Address 401 S Chester St

City Baltimore State MD Zip Code 21231-2730

FEC ID number of contributing federal political committee. **C**

Name of Employer David J Weber Funeral Homes Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 29 / 2008
Transaction ID: SA11AI.13045
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 420.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 23	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) Ora L. Wooster, III		Date of Receipt																					
	Mailing Address 51 Park Blvd		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	0	6	/	2	0	0	8														
	City	State	Zip Code		Transaction ID: SA11AI.13178																			
	Clementon	NJ	08021-4096																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Ora L Wooster Funeral Home		Occupation Funeral Director		<input type="text" value="100.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		<input type="text" value="270.00"/>																				

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="12775.00"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMP COM	Transaction ID: SB23.12944
	Mailing Address 120 MARYLAND AVENUE NE	Date of Disbursement 10 / 21 / 2008
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/Type
	Candidate Name DEMOCRATIC SENATORIAL CAMP COM Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) KNOLLENBERG FOR CONGRESS COMMITTEE	Transaction ID: SB23.12945
	Mailing Address 31000 Telegraph Road, #110	Date of Disbursement 10 / 23 / 2008
	City Bingham Farms State MI Zip Code 48025	Amount of Each Disbursement this Period 1125.00
	Purpose of Disbursement	Category/Type
	Candidate Name JOSEPH K. KNOLLENBERG Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 09	

C.	Full Name (Last, First, Middle Initial) LYNN JENKINS FOR CONGRESS	Transaction ID: SB23.12947
	Mailing Address P.O. Box 1441	Date of Disbursement 11 / 17 / 2008
	City Topeka State KS Zip Code 66601	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	Category/Type
	Candidate Name LYNN JENKINS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 02	

SUBTOTAL of Disbursements This Page (optional)	7125.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
MCCONNELL SENATE COMMITTEE '08

Transaction ID: SB23.12949

Date of Disbursement

Mailing Address PO BOX 1496

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

City State Zip Code
LOUISVILLE KY 40201

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Category/
Type

Candidate Name
MITCH MCCONNELL

Office Sought: House
 Senate
 President
State: KY District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

TOTAL This Period (last page this line number only) ►

8125.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) National Funeral Directors Association of the United States Inc			FEC IDENTIFICATION NUMBER C C00204008		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee CHARLES A WILSON, Jr.			Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 8		
Mailing Address 227 N LINCOLN AVENUE			Amount 3875.20		
City BRIDGEPORT		State OH	Zip Code 43912		
Purpose of Expenditure Campaign Advertisement		Category/Type 004			
Name of Federal Candidate supported or Opposed by expenditure: CHARLES A WILSON, Jr.			Transaction ID: SE.12941		
			Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential		
			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008		
Calendar Year-To-Date Per Election for Office Sought		3875.20			

(a) SUBTOTAL of Itemized Independent Expenditures	3875.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	3875.20
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
William C. Wappner, CFSP Signature	Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 8